

Army Aeromedical Standards— Summary of Vision, Hearing, Labs, Anthro Stds

Aeromedical Vision Standards							
Cycloplegic Refraction Standards			Visual Acuity, DQ if worse than:		Phorias, DQ if:		
Class	[<i>Qualified</i>]		Distant	Near	Eso	Exo	Hyper
1/1A*	Sphere: DQ < -1.50 to +3.00 < DQ Cyl: DQ < -1.0 to +1.0 < DQ		20/50	20/20	>8	>8	>1
2/3/4	NOT REQUIRED		20/400	20/400	>8	>8	>1

Class	Cover-Uncover Test	Cross-Cover Test	NPC DQ if:	Color Vision DQ if:
1 and 2/2F/3/4 Initial	Any detectable movement referred to optometry	Any detectable movement referred to optometry	>100 mm	PIP: 5 or more errors out of 14 plates FALANT: any errors out of 9 presentations
2/3/4 Other	Not Req	Not Req	Not Req	Not Req

All Classes of Aeromedical Standards	
Field of Vision, DQ if:	Any Defects
Depth Perception, DQ if:	>40 seconds of arc at 20 feet: <ul style="list-style-type: none"> Any error in blocks B through D of the AFVTA, Titmus II or Optec 2300, or Any errors in lines 1 through 7 of the 10 Level Randot Circles test
IOP, DQ if:	<8 or >21 mmHg in either eye or, 4 or more mmHg difference between eyes If <8 and due to PRK/LASIK, so state on FDME/FDHS

Aeromedical Audiology Standards						
Qualified if Equal or Better than:						
Class	500Hz	1000Hz	2000Hz	3000Hz	4000Hz	6000Hz
1/1A	25 dB	25 dB	25 dB	35 dB	45 dB	45 (see APL)
2/3/4	25 dB	25 dB	25 dB	35 dB	55 dB	65 (see APL)

Laboratory Normal Values, All Classes					
HCT/Hb	Male 40% - 52% (14-18 gm/dl)			Female 37% - 47%(12-16 gm/dl)	
UA Dipstick	Gluc Neg	Prot Neg	Micro / Dipstick	<5 RBC / Neg	<5WBC / Neg

Category	Fasting Blood Sugar	2-Hour Post-Prandial
Normal	<110	<140 (HbA1C < 7.0)
Impaired Glucose Tolerance	110 < FBS < 126	140 < 2HPP < 200
Diabetes Mellitus	>126	>200
Gestational Diabetes Mellitus	>105	>165

Anthropometric Standards Class 1/1A and Class 2 Qualified if:	
Total Arm Span, (TAS)	Greater than or equal to 164cm
Crotch Height, (CH)	Greater than or equal to 75cm
Sitting Height, (SH)	Less than or equal to 95cm for career transition to OH58 / TH67 Less than or equal to 102cm for all others

Blood Pressure less than 140/90 (regardless of age or flight class)

30 April 2007

ARMY FLIGHT EXAM CONTENT SUMMARY (exam worksheet)

30 April 2007

Home Phone () Work Phone ()		DOB:	Age for this exam:	*HIV Req.? YES / NO	Date:	
Class 1/1A and All Initial Class 2, 3 and 4		Comprehensive FDME (every 5 years between the ages of 20 and 50 and then annually thereafter-20, 25, 30, 35, 40, 45, 50, 51...)		FDHS		
Vital signs BP, Pulse, Ht, Wt, Waist Circ (in cm) Anthros (Class 1/1A) only Vision <input type="checkbox"/> VAs, Phorias by AFVTA, Cover-uncover test (tropias), Cross-cover test (phorias), NPC, IOPs, Color vision, Stereopsis/Depth Perception, Visual fields, Night vision Hx <input type="checkbox"/> Refraction <input checked="" type="checkbox"/> Cycloplegic (Class 1/1A only) <input checked="" type="checkbox"/> Manifest (Eyeglass Rx) (All classes if uncorrected <20/20) Audio _____ ECG _____ Dental _____		Vital signs BP, Pulse, Ht, Wt, Waist Circ (in cm) Vision <input type="checkbox"/> VAs, Phorias by AFVTA, Stereopsis/Depth Perception, <input type="checkbox"/> Manifest Refraction / Eyeglass Rx (All classes if uncorrected <20/20) Audio _____ Dental _____ Pap & Pelvic _____ (Gyn Report accepted)		Vital signs BP, Pulse, Ht, Wt, Waist Circ (in cm) Vision <input type="checkbox"/> VAs, Stereopsis/Depth Perception <input type="checkbox"/> Manifest Refraction / Eyeglass Rx (All classes if uncorrected <20/20) Audio _____ ECG not required unless clinically indicated or required by waiver or age 40 or over Dental _____ Pap & Pelvic _____ (Gyn Report accepted)		
Labs <input type="checkbox"/> UA w/ microscopic, HCT, HIV, FBS, Sickledex (excluding class 4), Chol, HDL, Trig, LDL		Labs <input type="checkbox"/> *HIV, UA w/ microscopic, HCT, Chol, HDL, LDL, Trig, FBS		Labs <input type="checkbox"/> None unless clinically indicated or per waiver requirements		
Notes: <input type="checkbox"/> RAT and AA (ARMA) <input type="checkbox"/> Valsalva <input type="checkbox"/> Refractive Surgery-see APL <input type="checkbox"/> Contact Lens Wear- see APL <input type="checkbox"/> Rectal & guaiac (Rectal by inspection to age 39 without Stool Guaiac: age 40 or older: DRE with stool guaiac/prostate)		Notes: SEE BELOW FOR 40 & older		Notes: <input type="checkbox"/> "Health Screening" / Directed Physical Exam <input type="checkbox"/> Dental and Pap/Pelvic are recommended for health promotion but are not required FDHS entries		
Age 40 and over (for all classes; initial /comprehensive FDME and FDHS), add: <input type="checkbox"/> Fasting Blood Sugar, complete Lipid panel <input type="checkbox"/> CVSP (Cardiac Risk Index calculated by VFSO) <input type="checkbox"/> DRE/Stool guaiac/Prostate Exam, comprehensive examinations only <input type="checkbox"/> PSA (Males- on comprehensive examinations only) <input type="checkbox"/> Mammogram: 40,42, 44,46,48,50, then yearly (req for all AD females) <input type="checkbox"/> IOPs <input type="checkbox"/> EKG				Retirement: <input type="checkbox"/> Perform a comprehensive FDME <input type="checkbox"/> CXR if age 40 or over <input type="checkbox"/> DD Form 2697 <input type="checkbox"/> Counseling on Hepatitis C screening NOTE: Must be a comprehensive exam		
Additional tests, studies and consults: Class 1/1A and Avn SERE: #40, DD2808, Statement Remarks: "Not afraid of dark spaces or confined places"						
Last name		First	MI	Rank	Provider's Stamp	Status

CORNEAL REFRACTIVE SURGERY INFORMATION REQUIRED
by the Army Aero-Medical Activity (AAMA) for determination of Flight Qualification

Flight Applicant

Last name: _____ First name: _____ Middle initial: _____

Date of Birth _____ Contact Tel. # _____

1. Procedure: Date of Procedure: _____ **Type (circle one) PRK LASIX LASIK**

2. Pre-operative Refraction

OD: _____ OS: _____

3. Post Operative Follow-up Examination (>6 weeks post-op when returning to flight)

Last /Current Exam Date	Visual Acuity (Distant)	Visual Acuity (Near)	Slit Lamp Exam for HAZE (0= no haze, 1= trace, 2=minimal, 3= moderate, 4= iris obscured) Note: Only "0" (no haze) is passing.
	OD _____ OS _____	OD _____ OS _____	OD : 0 1 2 3 4 OS : 0 1 2 3 4

4. Corneal topography, post operative: copy available ____ Date ____ Acceptable ____

5. Contrast Sensitivity (post operative)

☐ Contrast Sensitivity Testing done, Date ____ Results:
OD: _____ (Std is 20/60 or better each eye)
OS: _____ (Std is 20/60 or better each eye)

(or)

☐ Contrast Sensitivity testing is not readily available; Applicant denies difficulty with night vision to include increased glare, halos, starbursts, or other visual distortions.

Class 1A/1W Applicants (Required ONLY IF the Refractive Surgery was done AFTER the FDME vision/cyclo testing)

1. Post-operative, Cycloplegic refraction

Cycloplegic Refraction

OD _____
OS _____

2. Post-operative, Pass of Class I vision standards:

Distant Vision

Right 20/____ Corr to 20/____

Left 20/____ Corr to 20/____

Near Vision

20/____ Corr to 20/____

20/____ Corr to 20/____

3. Post-operative: Intraocular Tension O.D. _____ O.S. _____

AAMA: Attn AAMA staff: FAX 334-255-7030, 7606 (DSN 558) Phone 334-244-7430 (DSN 558)

Updated: 30 April 2007

ARMY ANTHROPOMETRIC STANDARDS FOR ENTRY PILOT TRAINING (CLASS 1A/1W, RO/RW)

Crotch Height (Leg Length) - The subject must stand completely erect against a wall, heels together, weight evenly distributed, and knees locked. The measurement is taken parallel with the wall from the floor to a point where light contact is made with the perineum in the midline.

Total Arm Reach - The subject must stand erect against a wall, arms outstretched at a 90 degree angle and parallel with the wall. The elbows must be locked. The fingertips of one hand must be in contact with the adjacent wall in the corner of the room. The horizontal distance between fingertips is recorded.

Sitting Height - The subject must sit on a hard, flat surface, facing forward, feet flat on the floor, with buttocks, shoulders, and back of head against the wall. Using a right angle on the head, the distance between the sitting surface and the top of the head is recorded in centimeters.

Measurement

CROTCH HEIGHT
TOTAL ARM REACH
SITTING HEIGHT

Class 1/1A, RW/RO

Qualified if:

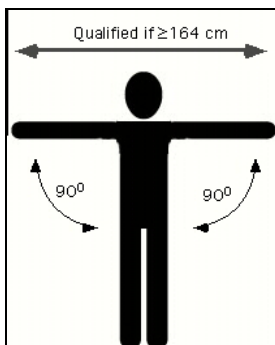
≥ 75.0 cm.
≥ 164.0 cm.
≤ 102.0 cm.

OH-58 Pilot or Aeroscout

-Qualified if

≥ 75.0 cm.
≥ 164.0 cm.
≤ 95.0 cm.

Anthropometric Diagrams

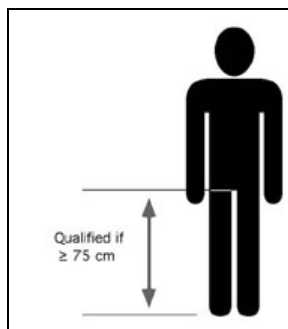
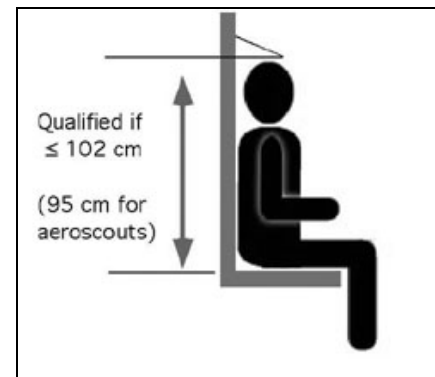


TOTAL ARM REACH (TAR)—The aviator candidate must stand erect against a wall, arms outstretched at a 90 degree angle and parallel with the wall. The elbows must be locked with the fingertips of one hand in contact with the adjacent wall in a corner of that room. The horizontal distance between fingertips is recorded in centimeters.

TAR _____ cm (std ≥164 cm)

SITTING HEIGHT (SH)—The aviator candidate must sit on a hard flat surface, outward, feet flat on the floor, with the buttocks, shoulders, and back of head the wall. Using a straight angle ruler on the head, the distance between the sitting and the top of the head is recorded in centimeters.

SH _____ cm (std ≤ 102.0 cm)



CROTCH HEIGHT (CH)—The aviator candidate must stand completely erect against a wall in bare feet, heels together, weight evenly distributed, and knees locked. The measurement is taken parallel with the wall from the floor to a point where light contact is made with the perineum in the midline. Results are recorded in centimeters.

CH _____ cm (std > 75 cm)

x _____
Signature/Date

If out of standards, see Antropometric APL.

If TAR < 159, must have in-cockpit evaluation at Fort Rucker, POC: DAC Tony Keener, 334-255-3259 (DSN 558)

30 April 2007

MEMORANDUM FOR AVIATION MEDICINE FACILITY

SUBJECT: Return of Flight Physical/Aeromedical Summary Encounter

1. The physical/aeromedical summary (AMS) submitted hard-copy is returned. The goal is for all submissions to be done electronically with the online, web-based, paperless physical and AMS program, AERO. The encounter may have been complete and qualified, or it may have been returned for completion and resubmission. If the latter, the reason returned is outlined in the attached documents—it could be for missing required items, report of potentially disqualifying condition that requires further elaboration or an aeromedical summary IAW the Army Aeromedical Policy Letters (APL), or information submitted is out of standards. Please review the reasons returned and promptly address the noted issues. Policy letters, forms, and AERO information are available at the Army Aeromedical Activity website (<https://aamaweb.usaama.rucker.amedd.army.mil/>).
2. The attached documents are for your facilities review and use. These are helpful to insure submissions are complete and IAW Army standards. These include:
 - a. Summary Table of Army Aeromedical Standards
 - b. Summary of Army Flight Exam Content
 - c. Corneal Refractive Surgery Reporting Worksheet
 - d. Army Anthropometrics Reporting Worksheet
3. AERO is the secure, web-based, online system used by more than 85% of providers submitting Army flight physicals. The system is very easy to use with any PC using Internet Explorer 5.5 to 6.x browser. It provides the template for the selected flight physical chosen and provides live standards checking for the physical, alerting the user to required missing information or data out of aeromedical standards. It also provides a template for completion of an aeromedical summary with an associated flight physical for submission. 40% of hard-copy encounters have to be returned to the facility due to missing information or values out of standards—AERO reduces this rate to <3%. AERO has proven itself valuable for saving everyone time, energy, and money by dramatically reducing the number of errors and omissions that are common to such activities. AERO also has the ability to provide facilities reports on information and submission status to track processing and dispositions generated.
4. To obtain an AERO account, see the website link and send the following information to the Activity via fax, snail mail, or e-mail:
 - a. Memorandum of Request for account
 - b. Completion of HIPAA training certificate
 - c. Verification of Security Clearance
5. It is recommended that all providers obtain an AERO account. It is also recommended that administrative clerks and physical exam medics/CNAs obtain AERO accounts to assist the flight surgeon/APA/ANP in the completion of flight physicals and ability to assist flight surgeon in reviewing and following submission until disposition.
6. Each service has their own unique requirements and nomenclature for the various flight physicals. One day all may be joint and uniform. For now, the Army nomenclature is as follows:
 - a. Class 1W/1A (aka Class 1): Initial Flight School Applicants. Class 1 physicals are good for 18 months of completion. When selected for flight training, all Class 1's will undergo a similar Rucker Flight. Only Class 1 personnel receive Exception to Policies (ETP) for disqualifying conditions (all others it is waivers).
 - b. Class 2: Trained Army pilots, comprehensive physicals only required every 5 years until age 50.
 - c. Class 3: non-rated aircrew (flight medics, flight engineers, firefighters, observers, UAS)—this class is most often under local flight surgeon and local commander control.
 - d. Class 4: Air Traffic Services personnel
 - e. Comprehensive (aka Long flight physicals): required at 20, 25, 30, 35, 40, 45, 50 and beyond.
 - f. Initial physicals: required for all Class 1 and all initial entries, as well as recall/returning personnel who have not had a flight physical in the past 5 years.
 - g. Aeromedical Summary: required for request for waiver, ETP, or suspension/permanent disqualification/no ETP.
7. Thank you for your time and attention to the care of Army aviation personnel. POC are the AAMA staff at DSN 558-7430 (civ 334-255-7430) or aama@amedd.army.mil. Fax # is 334-255-7606/7030.